Substitute for form 1429B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets us necessary)					Complete If Known Application Number 10/511,009			HECEI	1
					Application Number			ENTRAL FA	K CE
					Filing Date		March 24, 2005	FED.c	20
					First Named Inventor		Satchi-Fainaro	LERIS	20
					Group Art Unit		1624		
					Examiner Name		Balasubramanian,	v.	
Sheet	:	υľ			Attorney Docket Numb	c:	701039-052585-บร	3	
			ОТН	ER PRIOR A	RT – NON PATENT LIT	ERATURE DOCUMEN	ιτs		
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^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check murk here if linglish language Translation is attached.